June 1, 2004

In an effort to better facilitate the transportation of our physically challenged passengers, we require all passengers who board via the wheelchair lift to fill out this form. The information is designed to aid us in determining which bus would be appropriate for the requested transportation.

A couple of items to remember prior to boarding our buses:

- Do not have items hanging from the back of the chair which will impede the maneuvering of the wheelchair.
- Have the exact fare ready prior to boarding the bus. The driver can not make change and payment is required prior to boarding.
- Please be waiting at the curb for the bus. If you miss the bus we can not send the bus back and you will be required to pay the one way fare before your next trip. This is our "No Show" policy.

Please fill in the information below and fax this form to 845-340-3336 or mail to Ulster County Area Transit, 1 Danny Circle, Kingston, NY 12401 within 5 business days, to avoid interruption or delay of service.

Name	Address _			
(please print)		(Street)	(Town or City)	
Phone number	Emergency contact		/	
		(print nai	me) (phone number	
Combined weight of passo	enger and manual/electric wheelcha	air or scooter:	lbs/Date	
Actual width/length of wh	neelchair outside dimensions:	/		
Are you able to transfer to	a regular bus seat?			
Does an aide accompany (Aides must assist passen	•			
If you have any questions	s, please feel free to call our office.			
	Sincerel	y,		
	Cynthia	Ruiz		

Director of Public Transit